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CONFIRMATION NO. 7557

SERIAL NUMBER 10/065,022	FILING OR 371(c) DATE 09/11/2002 RULE	CLASS 340	GROUP ART UNIT 2612	ATTORNEY DOCKET NO. 02-087-MC	
APPLICANTS Michael Chiapperini, Woburn, MA; ** CONTINUING DATA ***** <i>None PTH</i> ** FOREIGN APPLICATIONS ***** <i>None PTH</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 09/19/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>PTW</i> Examiner's Signature Initials		STATE OR COUNTRY MA	SHEETS DRAWING 1	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2
ADDRESS 032118					
TITLE Personal safety device					
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		